

125404

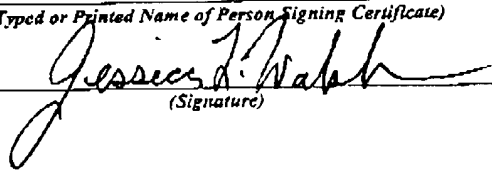
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE


APPLICANT:	Holly McDaniel, et al.)
) Group Art Unit: 2882
SERIAL NO.:	10/065,457)
)
FILED:	October 21, 2002) Before the Examiner:
) Song, Hoon, K.
FOR:	A METHOD AND SYSTEM FOR)
	TRAUMA APPLICATION OF)
	CT IMAGING) Confirmation No. 4025

Commissioner for Patents
P.O. BOX 1450
Alexandria, VA 22313-1450

Response to Office Action

This amendment is submitted in response to the Office Action dated June 17, 2003.

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)			Docket No. 125404
Applicant(s): HOLLY McDANIEL ET AL.			
Serial No. 10/065,457	Filing Date 10/21/2002	Examiner Hoon K. Song	Group Art Unit 2882
Invention: A METHOD AND SYSTEM FOR TRAUMA APPLICATION OF CT IMAGING			
RECEIVED CENTRAL FAX CENTER			
OFFICIAL			
I hereby certify that this <u>Transmittal and Amendment</u> (Identify type of correspondence)			
is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9318</u>)			
on <u>September 11, 2003</u> (Date)			
Jessica L. Walsh (Typed or Printed Name of Person Signing Certificate)			
 (Signature)			
Note: Each paper must have its own certificate of mailing.			

AMENDMENT TRANSMITTAL LETTER (Large Entity)				Docket No. 125404	
Applicant(s): HOLLY McDANIEL ET AL.					
Serial No. 10/065,457	Filing Date 10/21/2002	Examiner HOON K. SONG		Group Art Unit 2882	
Invention: A METHOD AND SYSTEM FOR TRAUMA APPLICATION OF CT IMAGING					
<u>TO THE COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	30 -	30 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	6 -	6 =	0 x	\$84.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00
 <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-0845 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 James J. Merrick Reg. No. 43,801 Cantor Colburn LLP 55 Griffin Road South Bloomfield, CT 06002 860-286-2929 Customer Service No. 23413 Confirmation No. 4025			Dated: September 11, 2003		
CC:			<div style="border-bottom: 1px solid black; margin-bottom: 5px;">I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</div> <div style="border-bottom: 1px solid black; margin-bottom: 5px;">Signature of Person Mailing Correspondence</div> <div style="border-bottom: 1px solid black;">Typed or Printed Name of Person Mailing Correspondence</div>		

P11LARGE/REV06